## CITY OF HAMPTON, VIRGINIA LAND USE APPLICATION

CASE NUMBER:
DATE SUBMITTED:
DATE COMPLETED:

To be completed by staff:	]					
APPEAL OF ZONING ADMINISTRATOR'S DECI	SION (also complete Box 1 on reverse)					
CONDITIONAL PRIVILEGE (also complete Box 2 on reverse)						
REZONING (also complete Box 3 on reverse)						
SPECIAL EXCEPTION (also complete Box 2 on reverse) USE PERMIT (also complete Box 2 on reverse)						
VARIANCE (also complete Box 4 on reverse)	,					
	ED FOR ALL APPLICATIONS					
PROPERTY ADDRESS & LEGAL DESCRIPTION (INCLUDING TAX IDENTIFICATION NUMBER):						
,	,					
CURRENT LAND USE OF THE PROPERTY:						
CURRENT ZONING OF THE PROPERTY:						
ADDRESS, CURRENT ZONING AND CURRENT LAND USE OF SURROUNDING PROPERTIES						
NORTH: SOUTH:						
EAST:	WEST:					
LAGI						
PROPOSED LAND USE OF THE PROPERTY (IF NO SF	DECIEIO LIGE IS DOODOSEN MOTE TUATA.					
PROPOSED LAND USE OF THE PROPERTY (IF NO SP	PECIFIC USE IS PROPUSED, NOTE ITIAT):					
PROPOSE TO _USE AN EXISTING BUILDING/_CON	STRUCT AN ADDITION/CONSTRUCT A NEW BUILDING					
CURRENT PROPERTY OWNER	APPLICANT (IF NOT CURRENT OWNER)					
	, , , , , , , , , , , , , , , , , , ,					
NAME:	NAME:					
ADDRESS:	ADDRESS:					
ADDITES.	ADDIEGO.					
PHONE NUMBER:	PHONE NUMBER:					
OWNER AUTHORIZATION:	APPLICANT"S AGENT					
OWNER ACTIONIZATION	ALLICATE GAGLET					
I HEREBY SUBMIT THAT I AM THE FEE-SIMPLE	NAME:					
OWNER OF THIS PROPERTY. I HAVE READ						
THIS APPLICATION & IT IS SUBMITTED WITH MY FULL KNOWLEDGE AND CONSENT.	ADDRESS:					
WI I OLL MYOWLLDUL AND CONSENT.						
	PHONE NUMBER:					
OWNER'S SIGNATURE & DATE						

## COMPLETE THE APPLICABLE SECTION

1. FOR APPEALS OF THE ZONING ADMINISTRATOR'S DECISION							
DATE OF THE DECISION BEING APPEALE	ED:						
DESCRIPTION OF THE APPEAL:							
	NAL DONALEGE O	DEGL	AL EVOEDT	ION A LIOF			
2. FOR CONDITION PERMIT APPLICATIONS (Day C with application. Applicati information a	are requires sup	plem icati	ental infor on towers r	mation form attacl require additional	1ed		
PROPOSED HOURS OF OPERATION FROM: TO:	WEEKDAYS	s	ATURDAY	SUNDAY			
3. FC	OR REZONING API	PLIC	ATIONS				
PROPOSED ZONING OF THE PROPERTY:	:						
4. F	OR VARIANCE API	PLICA	ATIONS				
DESCRIPTION OF REQUEST:							
CHECKLIST FOR SUBMISSION: (1) a completed land use application;				/5 if associated with sin	ngle		

- (2) the most recent surveyed plat of the property;
- (3) a non-refundable application fee:
  - (a) Appeals of the Zoning Administrator's **Decision - \$75 if associated with single** family residential use, \$200 for all others:
  - (b) Conditional Privilege \$325;
  - (c) Rezoning \$650 base fee plus \$100 per acre or portion thereof;
  - (d) Special Exception \$75 if associated with single family residential use, \$200 for all others:
  - (e) Use Permit \$650; or

others.

Only checks or money orders payable to the City of Hampton are acceptable forms of payment. Cash will not be accepted.

Additional information such as (but not limited to) a proffer statement, conceptual site plan, building elevations, or location of existing improvements (if not shown on plat) may be required by the Zoning Administrator or Planning Director after initial review of the application. Such information may be provided with the initial submission at the applicant's discretion. Appeals of the Zoning Administrator's Decision, Special Exceptions & Variances should be

submitted to the Permit Office, on the  $3^{rd}$  floor of City Hall (728-2444).

Conditional Privileges, Rezonings & Use Permits should be submitted to the Planning Department, on the 9<sup>th</sup> floor of the Harbor Centre Building, 2 Eaton Street (727-6140).

The mailing address for both departments is 22 Lincoln Street, Hampton, VA 23669.

DEVELOPMENT OF ANY PROPERTY IS SUBJECT TO COMPLIANCE WITH ALL APPLICABLE CODES, REGULATIONS AND ORDINANCES, WHETHER OR NOT THEY ARE SPECIFIED IN THE APPROVAL OF ANY LAND USE APPLICATION.